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FACSIMILE COVER SHEET

JUL 24 2006

Deliver to: Booth, Richard A., USPTO Art Group: 2812
Facsimile No.: (571) 273-8300 Date: July 24, 2006
From: Brent E. Vecchia, Reg. No. 48,011
Our Docket No.: 42P13230D Number of pages 13 including this sheet.
Application No.: 10/619,961 Filing Date: 7/15/2003
Docket Due Date(s): 7/22/2006

Enclosed are the following documents:

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

I hereby certify that this correspondence is being transmitted by facsimile on the date shown below to the United States Patent and Trademark Office.

Pat Sullivan 7/24/2006
Pat Sullivan Date

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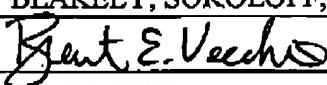
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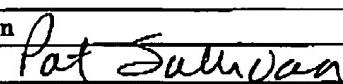
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application No.	10/619,961
		Filing Date	July 15, 2003
		First Named Inventor	Shafqat Ahmed
		Art Unit	2812
		Examiner Name	Booth, Richard A.
Total Number of Pages in This Submission	13	Attorney Docket Number	42P13230D

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Brent E. Vecchia, Reg. No. 48,011 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	July 24, 2006

CERTIFICATE OF MAILING/TRANSMISSION			
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Typed or printed name	Pat Sullivan	Date	July 24, 2006
Signature			

Based on PTO/SB/21 (09-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wir) 11/30/2005.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

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FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$ **120.00**)

Complete if Known	
Application Number	10/619,961
Filing Date	July 15, 2002
First Named Inventor	Shafqat A.
Examiner Name	Booth, R.
Art Unit	2812
Attorney Docket No.	42P13230

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayment of fee(s) Credit any overpayments
under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

FFF CALCULATION

1. EXTRA CLAIM FEES

Total Claims	13	Extra Claims	Fee from below	Fee Paid
Independent Claims	2	3*		
Multiple Dependent				

Large Entity		Small Entity		
Fee	Fee	Fee	Fee	Fees Description
Code	(S)	Code	(S)	
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	350	2203	100	Multiple Dependant claim, if not paid
1204	790	2204	385	*Release independent claims over original patent
1205	500	2205	150	**Release claims in excess of 20 and over original patent
SUBTOTAL (1)			(S)	0.00

**or number previously paid, if greater. For Reissues, see below*

2. ADDITIONAL FEES

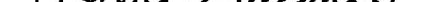
Large Entity		Small Entity			
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	
1051	130	2051	85	Surcharge - late filing fee or oath	
1052	2052	2052	25	Surcharge - late provisional filing fee or cover sheet	
2053	130	2053	130	Non-English specification	
1251	120	2251	80	Extension for reply within first month	
1252	450	2252	225	Extension for reply within second month	
1253	1,020	2253	510	Extension for reply within third month	
1254	1,590	2254	795	Extension for reply within fourth month	
1255	2,160	2255	1,080	Extension for reply within fifth month	
1401	500	2401	250	Notice of Appeal	
1402	600	2402	250	Filing a brief in support of an appeal	
1403	1,000	2403	500	Request for oral hearing	
1451	1,510	2451	1,510	Petition to institute a public use proceeding	
1460	130	2480	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1808	180	1808	180	Submission of Information Disclosure Stmt	
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.129(b))	
1910	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify)				SUBTOTAL (2)	

Fee Paid

120.00

120.00

SUBMITTED BY

Name (Print/Type)	Brent E. Vecchia	Registration No. (Attorney/Agent)	48,011	Telephone	(303) 740-1980
Signature				Date	07/24/06

Based on PTO/SB/17 (12-04) as modified by Blackley, Salkoff, Taylor & Zalman (w/r) 12/15/2004.
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